

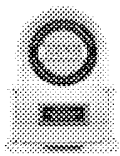
From: "Perry, Michael - Kentucky" <mperry-ky@amerisourcebergen.com>
Sent: Fri, 29 Jul 2011 18:48:57 -0400 (EDT)
To: "Hazewski, Edward" <EHazewski@amerisourcebergen.com>
Cc: "Martin, Eric" <EMartin@amerisourcebergen.com>
Subject: FW: Threshold Limits at Safescript Rx
Attachments: Request Threshold Review SafeScript.doc

Ed,

Please see attached along with additional information below.

Thanks,

Michael G. Perry
mperry-ky@amerisourcebergen.com
1-800-759-8810 ext 6486



Good Neighbor Pharmacy ranks "Highest in Customer Satisfaction with Chain Drug Store Pharmacies" according to J.D. Power and Associates.

Good Neighbor Pharmacy received the highest numerical score among chain drug store pharmacies in the proprietary J.D. Power and Associates 2010 National Pharmacy Study®. Study based on 12,338 total responses, and measures 7 chain drug pharmacies. Proprietary study results are based on experiences and perceptions of consumers surveyed May-June 2010. Your experiences may vary. Visit jdpower.com

Have a GREAT DAY!!

From: SafeScript [<mailto:pharmacist@safescriptpharmacy.com>]
Sent: Friday, July 29, 2011 10:29 AM
To: Perry, Michael - Kentucky
Subject: Threshold Limits at Safescript Rx

Hey Mike,

Here is the information you requested to help us keep drugs on our shelves, which will in turn will allow us to meet our prescribers and patients prescription needs.

Troublesome Drugs:
oxycodone 15 and 30mg
all oxycontin
oxycodone 5/325 and 10/325mg

Prescribers:
Deleno H Webb
1326 6th Ave
Huntington, WV 25701
304-525-9355

PLAINTIFFS TRIAL
EXHIBIT

P-16651_00001

AW4345167
1942373923

Phillip F Fisher
3554 US Rt 60 E
Barboursville, WV 25505
304-736-2981
BF3850763
1013996503

Ahmet H. Ozturk
1340 Hal Greer Blvd
Huntington, WV 25701
304-526-2177
BO1101512
1942206529

Hope this is everthing you need to help us address this reoccurring issue. Thank you for your time.

Rob Walker
Safescript Pharmacy
304-522-0435
pharmacist@saferxpharmacy.com



AmerisourceBergen Corporation
PO Box 959
Valley Forge, PA 19482
610/727-7000

Request for Threshold Review

This form must be used for threshold reviews to be considered.

Date 7-29-2011 Account Manager: Michael G. Perry

Customer Name: SafeScript Pharmacy

ABC Account Number: 010-052670

Customer's Total Monthly Dollar Volume: \$ 150,000

Specific Drug Family to be reviewed or ABC Item #: Oxycodone (All Oxycontin)

Customer's Anticipated Monthly Usage of Specific Drug Family: _____

Reason for Threshold Review:

(Note: Exceeding the established threshold does not in itself justify a threshold increase in all cases.)

Ed,

This customer and has had issues with them exceeding the thresholds on these items. Please review and see if we can up the thresholds on these items. Please see the additional information in the email.

**Thanks,
Michael G. Perry (ACM)**

Forward the completed request to:

Ed Hazewski
CSRA – Diversion Control Manager
Fax – 610-727-3650
ehazewski@amerisourcebergen.com **(Preferred)**

For CSRA use only: LawTrac Number -
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HIGHLY CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER
HIGHLY CONFIDENTIAL - SUBJECT TO PROTECTIVE ORDER

ABDC-STCT002875824
ABDCMDL08026157

P-16651 _ 00004